

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF  
COMMITTEE (in full)☐(Check if name  
is changed)Example: If typing, type  
over the lines.

12FE4M5

Teva Pharmaceuticals USA, Inc. Political Action Committee

ADDRESS (number and street)

25 Massachusetts Avenue, NW

Suite 440

☐(Check if address  
is changed)

Washington

DC

20001

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

marva.gray@tevapharm.com

☒(Check if address  
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐(Check if address  
is changed)

2. DATE

M M / D D / Y Y Y Y Y Y  
12 21 2011

3. FEC IDENTIFICATION NUMBER

C C00434811

4. IS THIS STATEMENT

☐

NEW (N)

OR

☒

AMENDED (A)

*I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer Deborah Alice Griffin

Signature of Treasurer

Deborah Alice Griffin

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
12 21 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 02/2009)